



Picture Rocks Fire District

LED Sign

Public Posting Form

LED Number _____

Date Submitted: _____

Contact Information

Organization Name: _____

Telephone Number: _____

Email Address: _____

Post wording limited to 18 characters with spaces up to three lines

Posting Start Date: _____ **Posting Termination Date:** _____

I certify that I have read the PRFD Led Sign Policy and the submitted posting complies with all requirements set forth.

Signature

Date

Renewal	Renewal Date	Termination Date	PRFD	Contact
1				
2				
3				

PRFD Administration

Date

PRFD Fire Chief Approval

Date